



State of Connecticut
Department of Public Safety
Division of State Police

DPS-90-C (Rev. 04/03)

CRIMINAL INFORMATION SUMMARY☐ ADDITIONAL PAGES

TROOP / UNIT: CSP_B		OTHER INVOLVED AGENCY: <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES,	
DATE: 7/16/04	TIME: 1342 hrs	INVESTIGATING TROOPER / OFFICER: Tpr Nigro #737	DPS CASE NUMBER: DPS04-035439
LOCATION OF INCIDENT (STREET NAME AND CITY/TOWN ONLY): South Shore Rd, Salisbury			
SUMMARY OF INCIDENT OR AFFIDAVIT: <input type="checkbox"/> ARREST MADE <input checked="" type="checkbox"/> UNDER INVESTIGATION Two employees of the New England Painting Co. listed below were involved in a construction accident at the above listed location. The employees were standing on a roof overhang over the front door when it gave way. As a result they fell approx 10 feet. Both sustained minor injuries and were transported to Sharon Hospital. OSHA was notified this incident is under investigation.			
VICTIM: (DO NOT IDENTIFY ANY JUVENILE BY NAME OR ADDRESS - IF JUVENILE, WRITE "JUVENILE" IN THE NAME FIELD & "AGE" IN DOB FIELD)			
NAME / BUSINESS / AGENCY: <input checked="" type="checkbox"/> M <input type="checkbox"/> F Holst-grubbe, Kevin		ADDRESS: (TOWN/CITY&STATE ONLY) Lower Rd, North Canaan	JUVENILE: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO AGE: _____ INJURED: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
NAME / BUSINESS / AGENCY: <input checked="" type="checkbox"/> M <input type="checkbox"/> F <i>Holst-Grubbe, Carl</i>		ADDRESS: (TOWN/CITY&STATE ONLY) Lower Rd, North Canaan	JUVENILE: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO AGE: _____ INJURED: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
NAME / BUSINESS / AGENCY: <input type="checkbox"/> M <input type="checkbox"/> F		ADDRESS: (TOWN/CITY&STATE ONLY)	JUVENILE: <input type="checkbox"/> YES <input type="checkbox"/> NO AGE: _____ INJURED: <input type="checkbox"/> YES <input type="checkbox"/> NO
ARRESTED: (DO NOT IDENTIFY ANY JUVENILE BY NAME OR ADDRESS - IF JUVENILE, WRITE "JUVENILE" IN THE NAME FIELD & "AGE" IN DOB FIELD)			
NAME: <input type="checkbox"/> M <input type="checkbox"/> F		DOB:	ADDRESS:
CHARGES: 1. 2. 3. 4.		COURT: GA: TOWN: DATE:	BOND: <input type="checkbox"/> CASH <input type="checkbox"/> SURETY <input type="checkbox"/> NON-SURETY <input type="checkbox"/> WPTA AMOUNT \$: <input type="checkbox"/> TO BE PRESENTED AT COURT <input type="checkbox"/> TRANS TO DEPT OF CORRECTIONS @: INJURED: <input type="checkbox"/> YES <input type="checkbox"/> NO AMBULANCE: <input type="checkbox"/> YES <input type="checkbox"/> NO HOSPITAL:
NAME: <input type="checkbox"/> M <input type="checkbox"/> F		DOB:	ADDRESS:
CHARGES: 1. 2. 3. 4.		COURT: GA: TOWN: DATE:	BOND: <input type="checkbox"/> CASH <input type="checkbox"/> SURETY <input type="checkbox"/> NON-SURETY <input type="checkbox"/> WPTA AMOUNT \$: <input type="checkbox"/> TO BE PRESENTED AT COURT <input type="checkbox"/> TRANS TO DEPT OF CORRECTIONS @: INJURED: <input type="checkbox"/> YES <input type="checkbox"/> NO AMBULANCE: <input type="checkbox"/> YES <input type="checkbox"/> NO HOSPITAL:
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SUPERVISOR'S APPROVAL REQUIRED: INITIALS: <i>SDA</i> ID #: <i>290</i> DATE: <i>07/16/04</i> THIS INFORMATION IS BEING RELEASED TO THE PUBLIC IN COMPLIANCE WITH THE FREEDOM OF INFORMATION LAWS. FOR ADDITIONAL INFORMATION ON MAJOR CRIMES OR ARRESTS, CONTACT THE CONNECTICUT STATE POLICE PUBLIC INFORMATION OFFICE. PHONE: 860-685-8230 FAX: 860-685-8301			